

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted With Initial Filing <b>OR</b> <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	PU040062
	First Named Inventor	Adam Robert Margetts et al.
	<b>COMPLETE IF KNOWN</b>	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**HYBRID RAKE/EQUALIZER RECEIVER FOR SPREAD SPECTRUM SYSTEMS**

the specification of which (Title of the Invention)

☐ is attached hereto

**OR**

☒ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032  
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<b>Name</b> JOSEPH S. TRIPOLI			
<b>Address</b> Thomson Licensing Inc.			
<b>Address</b> PO Box 5312			
<b>City</b> PRINCETON		<b>State</b> NJ	<b>ZIP</b> 08543-5312
<b>Country</b> USA	<b>Telephone</b> (609-734-6820		<b>Fax</b> (609) 734 -6888
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> ADAM ROBERT		<b>Family Name</b> MARGETTS or Surname	
<b>Inventor's Signature</b> <i>Adam Robert Margetts</i>			<b>Date</b> 5 / March / 2004
<b>Residence: City</b> COLUMBUS	<b>State</b> OHIO	<b>Country</b> US	<b>Citizenship</b> US
<b>Mailing Address</b>			
<b>Mailing Address</b> 632 Ashtabula Court			
<b>City</b> Columbus	<b>State</b> Ohio	<b>ZIP</b> 43210	<b>Country</b> US
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
<b>Given Name</b> ALTON SHELBOURNE		<b>Family Name</b> KEEL or Surname	
<b>Inventor's Signature</b>		<b>Date</b>	
<b>Residence: City</b> MELBOURNE	<b>State</b> FLORIDA	<b>Country</b> US	<b>Citizenship</b> US
<b>Mailing Address</b>			
<b>Mailing Address</b> 4013 Long Leaf Drive			
<b>City</b> Melbourne	<b>State</b> Florida	<b>ZIP</b> 32940	<b>Country</b> US
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

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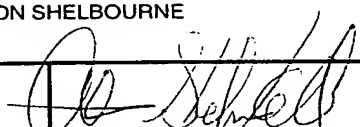
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Name		JOSEPH S. TRIPOLI					
Address		Thomson Licensing Inc.					
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PRINCETON			NJ		08543-5312		
Country		Telephone			Fax		
USA		(609-734-6820)			(609) 734 -6888		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name			Family Name or Surname				
ADAM ROBERT			MARGETTS				
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
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Mailing Address							
Mailing Address 632 Ashtabula Court							
City		State		ZIP		Country	
Columbus		Ohio		43210		US	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name			Family Name or Surname				
ALTON SHELBOURNE			KEEL				
Inventor's Signature			Date				
			3/4/04				
Residence: City		State		Country		Citizenship	
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City		State		ZIP		Country	
Melbourne		Florida		32940		US	
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							